

CMS MEDICARE PART D PLAN RULES FOR TRANSITION PRESCRIPTION REFILLS

The Centers for Medicare and Medicaid Services (CMS) has established rules to allow for transition refills when a Part D beneficiary either **enrolls in a Part D Plan** or the **formulary of the beneficiary's current Part D Plan changes**.

NEW ENROLLEES INTO A PART D PLAN

This rule is applicable when a Medicare-eligible beneficiary enrolls in a Part D Plan, and:

- The beneficiary's previously filled medication is **not on the new plan's formulary, or**
- The new plan requires **prior authorization or has step therapy requirements** for the previously filled medication.

IN THE RETAIL SETTING: In these situations, CMS requires that the new Part D Plan provide at least a **30-day transition refill** (unless the prescription is written for less than 30 days) in order for the individual to have adequate time to find a suitable alternative or pursue an exception from the plan. ***This refill only applies to the first 90 days of the beneficiary's coverage under the new plan.***

RESIDENTS IN A LONG-TERM CARE FACILITY: For long-term care residents, CMS requires that Part D plans provide a minimum **31-day transition refill** (unless the prescription is written for less than 31 days) and unlike prescriptions filled in the retail setting, ***the Part D plans must honor multiple fills, as needed, throughout the 90-day transition period.***

FORMULARY CHANGES

This rule is applicable when a Part D plan takes a drug off its formulary, or makes changes to the preferred or tiered status of a drug.

- CMS requires that a Part D plan provide **at least 60 days written notice** to affected beneficiaries prior to removing a covered Part D drug from its formulary or making changes to the preferred or tiered status of a drug. Unless approved by CMS, Part D Plan formulary changes are effective January 1st of each year.

If the a plan has not effected a "**meaningful transition**," by January 1, 2008, which can be evidenced by the processing of an exception request or a claim for a formulary alternative, the plan will be expected to provide transition refills beginning January 1, 2008, continuing until the time that meaningful transition has occurred.

- If the Part D Plan **has not provided 60 days notice to the beneficiary**, then it must provide the beneficiary **with up to a 60-day supply** of the drug under the same terms previously provided, as well as providing the required written notice of the formulary change. This rule is not applicable if the medication is medically contraindicated.

